



COOK COUNTY HEALTH

Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners

Erik Mikaitis, MD, MBA
Interim Chief Executive Officer
Cook County Health

Board of Directors

Lyndon Taylor
Chair of the Board

Hon. Dr. Dennis Deer, LCPC, CCFC
Vice Chair of the Board

Jay Bhatt, DO, MPH, MPA
Robert Currie
Raul Garza
Joseph M. Harrington
Robert G. Reiter, Jr.

Sam A Robinson, III, PhD
Tanya R. Sorrell, PhD, PMHNP-BC
Otis L. Story, Sr., MA, MHSA, FACHE
Mia Webster Cross, MSN, RN

To: Erik Mikaitis, MD
Debbie Santana

From: Abayomi Akintorin

Date: July 15, 2024

CC: Jasmine Davis
Alisha Patel
Jeff McCutchan
Claudia Fegan, MD

Memo: Re: Bylaws amendments June 2024

Please find attached a summary of the major amendments to the EMS Bylaws approved by the EMSC in June 2024. A copy of the Bylaws with the amendments, and the Redline edition were submitted to Ms. Debbie Santana.

Please refer to those copies for full details, as needed or if needed.

This summary shows the major amendments in blue highlights of the PDF document. Other minor amendments are mainly clarifications, correction of tenses, and typos in the version from 2018.

Very Sincerely,

Abayomi Akintorin, MD
President, EMS

DEFINITIONS: (Page 10)

LICENSED INDEPENDENT PRACTITIONER: Any individual permitted by law and by Hospital to provide care, treatment, and services, without direction or supervision, within the scope of the individual's license and consistent with individually granted clinic privileges.

ARTICLE II: PURPOSES (5) (Page 15)

To develop, adopt, and amend Policies, Bylaws, Rules and Regulations to establish a framework of self-governance of the Medical Staff, and a means of accountability to the Board; and in so doing, ensure that all Medical Staff Policies, Bylaws, Rules, and Regulations, are in alignment with Hospital policies and the Rules of Organization and Procedure of the B of the Cook County Health

ARTICLE VI: CLINICAL PRIVILEGES: SECTION 5 C (Page 37)

A. Member Not Entitled to Reappointment

A Member, granted a Leave of Absence from the Medical Staff pursuant to Section 5, shall not be entitled to reappointment under the following circumstances:

- a) If the Member's absence exceeded the time granted by the Leave of Absence and/or
- b) If the Member's Clinical Privileges elapsed during the Leave of Absence.
- c) If the Member has not treated or participated in the treatment of a Hospital or ACHN clinic patient for a period of at least two (2) years prior to the notice set forth in Section 2(A), Initiation, of this Article.

The Member shall not be entitled to a hearing or an appeal with respect to such denial.

- 1) If a Department Chair notifies the MSSD that (I) above applies to a Member of his or her Department, the MSSD shall not be required to transmit an application for reappointment to the Member as set forth in Section 2(A), Initiation, of this Article.
- 2) Except as set forth in (I) above, if a Member who is not entitled to apply for reappointment wishes to be considered for appointment to the Medical Staff, he or she shall submit an application for an initial appointment as provided in Section 1, Application for Initial Appointment, of this Article.

ARTICLE VII; CORRECTIVE ACTION. SECTION 4. SUMMARY SUSPENSION OF CLINICAL PRIVILEGES
B. Procedure – (Page 50). **This amendment complies with strong recommendations by TJC
Physician Surveyor**

- 1) The Peer Review Committee shall meet within 14 days of summary suspension, and issue an interim report within 21 days of the summary suspension.

ARTICLE XIV: DEPARTMENTS: SECTION 2 (A) 2 (Page 100). **This amendment was made in
compliance with TJC Requirement**

- 1) **Focused Professional Practice Evaluation.** The Department shall be responsible for the development of criteria for Focused Professional Practice Evaluation at initial appointment, for newly requested privileges, or as part of a performance assessment plan. The information gathered from the Focused Professional Practice Evaluations shall be made available to the Department as well as the Member and will be transmitted to the MSSD for review by the Credentials Committee or, if applicable, other committees such as the Peer Review Committee. To ensure transparency, fairness, objectivity, and measurable criteria for any FPPE trigger, the EMS Committee shall maintain oversight of every FPPE from every Department. FPPE Triggers are subject to the approval of the EMS Committee.

ARTICLE XIV – QUALIFICATIONS, SELECTION, TENURE, AND DUTIES OF DEPARTMENT
CHAIRSECTION 3 E (Page 102)

Removal of Department Chair. The Department Chairs have At-Will status and can be removed by the Chief Executive Officer or an authorized designee. Such removal shall not affect the former Chair's Medical Staff Membership, Clinical Privileges or Staff Category.

ARTICLE XVIII: RULES AND REGULATIONS (Page 120) – **The Board approved this amendment earlier. Now it is being included in the new version of the Bylaws**

- A. The procedure to propose and obtain approval to amend the Rules and Regulations shall be formulated through a process of the Executive Medical Staff. The Executive Medical Staff shall be able to review, discuss and approve any changes to the Rules and Regulations by a majority of the Members of the Executive Medical Staff

- B. The procedure to propose and obtain an urgent amendment to the Rules and Regulations is done through the Executive Medical Staff